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ABSTRACT

Recently, Indian people from the United States and Canada recommended coping-skills training for American Indians, to help in handling stress, becoming self-determined, being assertive, problem solving, and redesigning social roles and support systems. Some 30 tribal groups and agencies participated in a cultural adaptation of an assertive coping-skills training intervention program for a year. The general themes of coping, self-determination, and communication were reflected in the ultimate program goal, which was competence in a biculturally appropriate lifestyle. Brainstorming of program goals among community members provided the cultural input necessary for designing instructional methods and for assessing culturally-determined perceptions of the personal growth process. Formal and informal modeling provided a variety of Indian coping models enacting assertive behavior in several Indian and non-Indian social, family, and business settings. Indian and non-Indian persons rated 24 pre-training and 24 post-training role play scenes by 6 participants to determine whether relevant and noticeable change had taken place. Results indicated that the cultural adaptation of social skills training appeared to be more effective for American Indians than traditional psychological approaches. (CM)

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Counseling With American Indians: Issues In Training Assertiveness and Coping Skills

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COUNSELING WITH AMERICAN INDIANS:

ISSUES IN TRAINING ASSERTIVENESS AND COPING SKILLS

The counseling profession's vision of what may be helpful for American Indian people is being challenged at this time. Despite much energy spent by psychologists for the improvement of American Indian problems, evidence remains that Indian people seldom look to the traditional counseling process as a means of improving their chosen way of life. Of those Indians who have approached conventional counseling centers, fifty-five percent were not motivated to return after the initial interview. This contrasts with thirty percent for their non-Indian counterparts, (Sue, Allen, & Conaway, 1978). Another index of this disenchantment is that Indian students pursue doctoral degrees in educational psychology and psychology less frequently than any other field in the behavioral sciences (Chavers, 1980). Tribal people appear to be increasingly turning to indigenous healers for assistance (Bergman, 1975; Jilek-Aall, 1976; Dinges, Trimble, Manson, Pasquale, 1981). And the traditional "facilitative communication" approach emphasized by most professional training programs has been found to be less preferred by Indians than directive communication approaches (Dauphinais, Dauphinais & Rowe, Note 1).

At the same time, however, an obvious need exists for effective helping services, particularly for Indian youth, but also for the general population in such areas as occupational development, family strife, bicultural stress, and a variety of problems associated with the special status of Indian people which are the residue of their unique history with the federal government.

Practioners and researchers of counseling, who have had experience working with American Indian clients, acknowledge the limitations of the traditional helping paradigm of individual, often remedial, counseling wherein aspects of the communication process and expectations of the helping process are frequently misunderstood (Attneave, 1969; Trimble, 1976). The traditional helping paradigm not only implies a standard of treatment which ignores cultural-ethnic-racial-social differences, but also subscribes to a definition of mental health emphasizing negative aspects of pathology and intrapsychic deficits which by its nature is demeaning to a people who are oppressed by the dominant culture. The suggestion of Dauphinais (Note 1), that the communication aspect of counseling be modified so that effectiveness with Indian people would be enhanced, is helpful and even unique in being empirically based. However, it may be necessary for an effective communication style to be coupled with counseling interventions which are more culturally neutral than those traditionally advanced by psychologists in the past.

While some would reject all that psychology has had to offer, it is suggested here that we carefully examine what is available at this time that may benefit Indian people regardless of past record or cultural origin. Reduced to the basic concern, at issue is the controversy of whether a bicultural approach to contending with the dominant American culture is a viable option for Indian people.

Biculturalism refers to dual modes of cultural behavior that can be learned by an individual and appropriately employed under different circumstances (Attneave & Kelso, 1977). Some Indian researchers believe that a truly bicultural lifestyle of functioning in both Indian and American cultures is a myth, that one will necessarily become ineffectively stranded between the

the two. They speak of the inevitable clash between Indianness and Angloness wherein one lifestyle replaces the other (Leon, 1965) or personal preferences and commitment to one lifestyle predominates (Charleston, Note 2). Others, however, support the idea that effective functioning in two or more cultures leads to greater self-actualization (Dinges, Yazzie, & Tollefson, 1974). The acceptance or rejection of a bicultural lifestyle not only depends upon positive and negative reinforcements of socially appropriate behaviors, but also relies on the internalization of ethnic identity, judgement standards, and self-evaluative reactions (Chance, 1968; Keller, 1972).

A concept compatible with the American Indian holistic worldview by including physical, social, and cultural environments of individuals is that of social competence. Social competence is defined as the extent to which a person's background and present life show behaviors indicative of social participation, interpersonal competence, individual achievement, and effective adaptation to the environment (Ainsworth & Bell, 1974). The shift of focus from individual concerns (Thoresen, 1969) to individual concerns within the social system extends beyond interpersonal, emotional, and decision problems (Krumboltz & Thoresen, 1976). Social competency appears to be a relevant standard of normalcy for American Indians since many topics in counseling often center around concerns over the successful and unsuccessful outcomes of interactions within the social environment.

Increased concern in counseling with self-management and cognitive processes in dealing with anxiety or performing more effectively in various life situations has resulted in the growth of coping skills training. Coping-skills training programs are generally designed with a social learning approach

(Bandura, 1977) and are therefore conducive to goals of social competence, contextual analysis, and traditional ways of American Indian learning.

Studies of the effectiveness of social skills training with diverse ethnic groups and studies of the adaptation of skills-training programs to particular cultural contexts are few in comparison to the rapid expansion of research interest in this intervention approach with the general population. Various components of the skills-training model were examined for race and population effects in treating problems of cognitive impulsivity (Genshaft & Hirt, 1979), acquisition of delay behavior (Dean, 1974), responsibility training (Blasi, 1971), and modification of inhalent abuse (Brix, 1977). Those investigations achieving significant results (Dean, 1974; Genshaft & Hirt, 1979) lend promise to possible application and adaptations with cultural groups other than those under study.

David (1976) describes a program of relevance to American Indian bicultural conflicts. He suggests the use of social learning theory to prevent intercultural adjustment problems. The process of transferring reinforcers that fit both cultures, discriminating between punishing stimuli in one or the other cultures, and developing new reinforcers congruent with the social structure of one or the other cultures is promising but limited in that it does not address internal conflicts and performance debilitating reactions (e.g., value differences). The few existing skills training programs reported with American Indians reflect a major problem in Indian-White relations, that is, effective cross-cultural communication (Hawkins, 1977; LaFromboise, 1980; Swanson & Henderson, 1977).

A number of traditional and non-traditional social units currently exist in Indian communities that provide physical, social, and emotional support.

The traditional extended family and tribal society network-clan has received great attention as an impetus for group therapy to mobilize families, relatives and friends into a social force that counters the depersonalizing trends of contemporary life patterns (Attneave, 1969; Edwards & Edwards, 1980). Numerous social agencies that provide assistance for serious social problems (e.g., poverty, unemployment, alcoholism and other emotional problems) have in-service training that could provide a vehicle for transmitting coping-skills. As these programs become determined by American Indian professionals and paraprofessionals, Indian people increasingly look to them as well as traditional networks for help in solving problems and achieving social competence. Counselors of American Indians could profit from respecting the existing systems, values and norms of their clients and engaging in community outreach with existing support groups.

Recently, Indian people from diverse areas of the United States and Canada met at the White Cloud Center for Indian Mental health to suggest priority areas in need of research in the areas of coping and adaptation with American Indians. They recommended several target areas amenable to coping-skills training: handling stress, becoming self-determined, being assertive, problem solving, and redesigning social roles and support systems.

There are several significant advantages for a coping-skills approach to providing psycho-social assistance for American Indian people. Importantly, it is culturally neutral, emphasizing any target behaviors which may be decided upon. That is to say, it assumes no necessary model of appropriate behavior or mental health. It views acquiring new behaviors, whether overt or affective, as a process of learning. The preferred vehicle for presenting skills training is a small group rather than individual treatment.

Also, it lends itself well to preventive applications. And, finally, it is applicable to a wide range of problem areas that may be particularly relevant to Indian people, such as: assertiveness, stress reduction, problem solving, job interviewing, parenting, substance abuse programs, leadership training, and others. In each case, however, special attention must be given to the appropriate cultural adaptation of a technology that is itself culture-blind.

What follows is an account of the cultural adaptation of an assertive coping skills training intervention with American Indians. The process occurred over a one-year period of time with some 30 tribal groups and agencies. The goal of the current discussion is not to write a prescription for how to adapt coping skills training with American Indian groups. It is hoped instead that by describing and reflecting on this experience, a basic understanding of the adaptational processes necessary in designing counseling interventions of relevance to American Indian populations will be clarified.

American Indian interest in assertion training is evident as one listens to Indian political statements which often use the verbage of assertiveness (Bridge Between Two Worlds, Note 3; Peaches, 1978). Conference offerings, recommendations, publications, as well as requests for training American Indian assertiveness are increasing (Peniston & Burman, 1978; Goddard, Note 4; LaFromboise, Note 5; Masters, Note 6; Engels, LaFromboise, Kauffman, & Maestas, Note 7). Since many problems in Indian-White relations revolve around misunderstandings of expectations in communication (Wax & Thomas, 1961), it follows that assertion training, rather than relaxation, self-statement modification, or other passive coping techniques, would be the skill training intervention of choice.

The need for cultural adaptation became evident upon review of existing assertion programs. The content of most of these programs is biased toward middle class concerns, void of considerations for perceptions and implications of interracial assertive interactions (Cheek, 1976) and naive about the belief systems of culturally oppressed individuals (Rowe, Boyand, & LaFromboise, Note 8). Relevant goals for this particular program became crystalized after numerous community discussions and testimonials of situations in which Indian people would like to have behaved differently:

1. Challenging educators and curriculum materials which over-generalize or stereotype Indians.
2. Openly expressing disagreement with other Indians at meetings instead of complaining afterwards.
3. Maintaining your composure when you are called names like "Chief," "Injun," "Squaw," or "Brave."
4. Standing up to the jargon of federal and local program administrators.
5. Stabilizing outside or white interference which undermines group efforts.
6. Refusing requests from relatives and friends that are unreasonable and beyond your ability to grant.
7. Telling someone who thinks they are being helpful, that they are in the way.

The general themes of coping, self-determination, and communication are reflected in the ultimate goal of this program which is competence in a biculturally appropriate lifestyle. A bicultural assertive lifestyle involves being: benevolently interested in the needs of the group, socially

responsible to perpetuate a belief system that highly values personal rights and the rights of others, self-confident in situations requiring assertive behavior for self and fellow tribal members, and decisive about being assertive when it is necessary and culturally appropriate to do so. Subgoals include the knowledge and practice of: communication skills to enhance self-determination; coping skills against the pressure to acculturate or give up one's Indian identify; and discrimination skills concerning the appropriates of assertive behavior in Indian and non-Indian cultures (LaFromboise, 1980).

The brainstorming of program goals among community members provided an informal means of insuring the cultural input necessary for designing instructional methods and assessing culturally determined perceptions of the process of personal growth. Formal assessment of assertion levels and target situations was also conducted (LaFromboise, Note 9). A comparison of American Indian responses on the Adult Self Expression Scale (Gay, Hollandsworth, & Galassi, 1974) with non-Indian responses allowed for social comparison of behavioral norms in two different contexts. During training the formal assessment provided consciousness-raising for respondents as to their need to be assertive.

Instructions of the theoretical and practical elements of assertive behavior followed self-assessment and consciousness raising. General information about the verbal and non-verbal components of assertive, non-assertive and aggressive behavior, rights and responsibilities, and effective communication (Gordon, 1970) were presented throughout training. The key instructional element of this particular assertion program stressed the situation-specific nature of assertiveness which depends on the place, the time, and the person

with whom one is being assertive. Indian-specific issues in message matching were designed as a result of community discussions which frequently referred to the differences in Indian and White language content, style, and function (LaFromboise, Note 10). General categories of Indian and non-Indian target people were created to simplify discrimination training. Sample role play scenes were designed and tribal people surveyed as to their preference for different kinds of assertive responses (basic, empathic, or escalating). Rights issues were most easily addressed by distinguishing between human rights and special Indian rights based on tribal sovereignty and treaty agreements (Washburn, 1976).

Formal and informal modeling was designed to provide a variety of Indian coping models enacting assertive behavior in several Indian and non-Indian social, family, and business settings (Rowe & LaFromboise, 1979). Indian models were also necessary to enhance the motivation and depth of self-exploration in future training sessions when the counselor may not be American Indian (Carkuff & Pierce, 1967). The modeling videotapes produced for this project included a stimulus tape to elicit feelings about the need for Indian assertive behavior; a testimonial tape in which Indian people discuss and demonstrate times when they were assertive and positive results occurred; a discrimination tape of assertive, non-assertive and aggressive responses; and a demonstration tape of assertive Indian message matching.

The power of American Indian group support and consensus was most evident during the behavior rehearsal and feedback segments of assertion training. Numerous problem situations involving the denial of individual rights and group rights were readily presented by the Indian participants. Coping rather than mastery behavior rehearsals were emphasized. The importance of

the American Indian spokesperson role became evident as group participants continuously placed priority for mastery on situations involving individuals being assertive for the sake of the group or tribe. Internal conflict about assertiveness was noticeable as some participants became increasingly anxious during behavior rehearsals. This afforded an opportunity to clarify American Indian beliefs about rights and responsibilities through group cognitive restructuring procedures (Lange & Jakubowski, 1976) as well as the opportunity to practice and refine assertive responses.

Since Indian people are often expected to know their strengths rather than exaggerate or flaunt them (Edwards & Edwards, 1980), the training participants usually accepted self-disclosed information or feedback about their performance well. Group participant feedback during Indian to White assertive behavior rehearsals frequently concentrated upon eye contact, timing, loudness of voice, and the content of the message since they believed that Whites often appear to be more concerned about the direct and succinct nature of spoken words rather than the manner in which they are delivered (Hall, 1976). Group members appeared to be most concerned about potential social reinforcers and the appropriateness of assertive behavior during Indian to Indian behavior rehearsals. The group sharing of consensual reactions to assertive performance of those involved in the coaching process (Flowers & Guerra, 1974) and the increased accurateness of predictions about social reinforcers in American Indian cultural contexts.

Assessment of the efficacy of an assertion training program adapted instructionally to respect the American Indian traditions of role modeling and group consensus was conducted using a social validation approach (Kazdin, 1977; Wolfe, 1978). The social acceptability of assertion training as a

relevant focus for coping skills intervention was earlier verified on the basis of increased requests for training by American Indian groups. The likelihood of Indian traditional and non-traditional groups supporting this coping skills intervention depends upon several factors. It is critical that counselors interested in this type of work be sensitive and knowledgeable of diverse tribal groups, cautious of making unwarranted claims about the effectiveness of assertion training, and skilled in directing group discussions away from racial stereotyping and generalizations. Preventative group skills-training utilizing existing network systems appears to be a more cost-effective use of counselors recognized by the Indian community as helpful than employing them in individual, remedial counseling. The transition of many Indian staff members from social supportive roles to more assertive social-action roles is also more cost effective for community agencies.

The ease of implementing a program such as the one described depends upon perceived community need, community readiness for professional interventions, and community involvement in the planning, adaptational, and dissemination phases of the program. One urban community proposed a three-phase method of training in which the Indian center staff underwent extensive assertion training, then invited the urban Indian community to participate in basic assertion training. This allowed training opportunities to the larger Indian community and also provided their staff with group training experience and feedback from the counselor concerning their assertive leadership behaviors. Finally, the staff presented this coping-skill as one of many possible interventions when hosting a regional Indian alcoholism counseling conference (Lincoln Indian Center, Note 11).

The social appropriateness of training American Indians in a behavior alien to their preferred lifestyle is often questioned. When assertiveness is presented as a situation-specific behavior rather than a global trait through illustrating existing examples of bicultural adaptive behavior, concern about ethical conflicts decreases. A subjective evaluation method which determines whether the change made during treatment is socially appropriate and important is the social comparison approach (Kazdin, 1977).

The behavior of group participants in the assertion program was evaluated by combined social comparison and behavior roleplay rating procedures to assess social competence. American Indians, who were likely to have contact with the participants, and non-Indians participated as raters of American Indian videotaped behavior rehearsals. Raters were asked to rate 24 pre-training role play scenes and 24 post-training role plays enacted by six participants of the assertion program one month following training to determine whether change during the interventions was relevant as well as noticeable. For a more detailed analysis see the author.

The results indicated that this assertion training intervention had increased participants' voice level, requests for new behaviors during assertive interactions, emotional tone of voice, and overall level of assertiveness as perceived by Indian and non-Indian raters. The minimal degree of difference in the ratings of Indian and non-Indian raters lends assurance to the generalizability of these trained assertive behaviors in both Indian and non-Indian social contexts.

Program evaluation of assertion training with American Indians can take on several less-obtrusive forms than the laboratory simulation reported here.

In vivo measures of conversation samples during meetings analyzed according to linguistic and paralinguistic components (Eisler, Miller, & Hersen, 1973) lends promise as an assessment tool. Other assessment procedures such as self-report inventories and peer observations could be utilized depending upon the group's acceptance of paper and pencil measures.

The stated outcomes of this project represent one attempt to provide a guide for social competence in which American Indians are able to: meet the general demands of an assertive society, defend their special rights as sovereign people, discriminate the appropriateness of acting assertively within Indian communities, and enact assertive behavior without undue anxiety in cross-cultural interchanges. Other skills training interventions could be similarly adapted to emphasize the positive aspects of American Indian responses to problems and their refinement within different cultural contexts. The cultural adaptation of social skills training appears to be a more effective and accountable means of providing preventative service to American Indian people than the traditional psychological approaches attempted previously. Further research on the impact of helpers on tribal communities and American Indian perceptions of salient attributes of the helping process might be enhanced by an understanding of the manner in which changes in self-perceptions, person-perceptions, affect and behavior of American Indians and their significant others is achieved in social situations. Respect for the less-interferring, consultant role of helpers given by American Indian people may be furthered engendered by counselors who recognize their advisory function within a holistic social system. Mutual respect for styles of living, coping and helping not only lends support for cultural diversity but cultural pluralism as well.

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